

# Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500.

Amendment

☐ Yes

☐ No

<b>1. Committee Information</b>			
a. Full Name Pastor Sylvester Williams Campaign Committee		c. ID Number	
b. Mailing Address (include City, State and Zip Code) 404 Sparella St Durham, N.C. 27703		d. Date Organized 7-9-09	
		e. Phone Number 596-2682	
<b>2. Candidate Information</b>			
a. Full Name Sylvester Williams		<input type="checkbox"/> Candidate's Primary Committee	
b. Mailing Address (include City, State, and Zip Code) 404 Sparella St Durham, N.C. 27703		c. Candidate ID Number	d. Party Affiliation
		e. Office Sought City Council ward 2	f. Jurisdiction
		(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)	
<b>3. Treasurer Information</b>		<b>4. Custodian of Books Information</b>	
a. Full Name Candace LaTonya Burwell		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) 837 Southpointe Crossing Drive Durham, N.C. 27713		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number 696-0091 (C) 450-0559 (H)	d. Email Address Tony4_Burwell@msn.com	c. Phone Number	d. Email Address
<b>5. Assistant Treasurer Information</b>		<b>6. Account Information (incl. CRO-3500)</b>	
a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>RECEIVED</b>   JUL 13 2009   DURHAM COUNTY  BOARD OF ELECTIONS </div>			
<b>CERTIFICATION</b>			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.			
<u>Sylvester Williams</u> Printed Name of Signer		<u>Sylvester Williams</u> Signature of Appointed Treasurer	
		<u>7-9-09</u> Date	



North Carolina  
State Board of Elections  
506 N Harrington Street  
Raleigh, NC 27603

RECEIVED

JUL 13 2009

DURHAM COUNTY  
BOARD OF ELECTIONS

Kimberly Westbrook-Strach  
Deputy Director – Campaign Reporting

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173  
Fax: (919) 715-8047

### Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

**FILED BY:**

Candidate Name:

Pastor Sylvester Williams

Treasurer Name:

Candace LaTonya Burwell

Treasurer Address:

837 Southpointe Crossing Drive

(include city, state, & zip)

Durham, N.C. 27713

Treasurer Phone:

696-0091 (C)

450-0559 (H)

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

7-9-09

Date Signed

  
Signature of Candidate

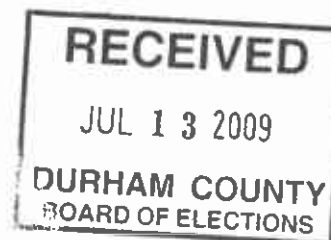
Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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### Certification of Threshold

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

**FILED BY:**

Committee Name: Pastor Sylvester Williams Campaign Committee  
Treasurer Name: Candace LaTonya Burwell  
Treasurer Address: 837 Southpointe Crossing Drive  
(include city, state, & zip) Durham, N.C. 27713

Treasurer Phone: 696-0091 (C) 450-0559 (H)

Check One:

☒ I certify that this committee intends to neither receive nor expend more than \$3,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$3,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

☐ I am withdrawing my Certification to remain under the \$3000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

7-9-09  
Date Signed

[Signature]  
Signature

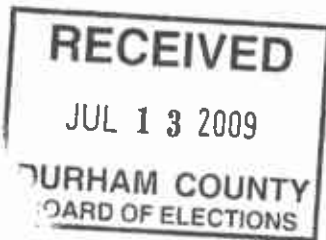
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### Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Sylvester Williams  
Committee Name: Pastor Sylvester Williams Campaign Committee  
Treasurer Name: Candace LaTonya Burwell  
If Candidate is own treasurer, designate an agent to carry out designations: \_\_\_\_\_  
Committee ID #: \_\_\_\_\_  
Level Registered: [State] [County] If county, specify: Durham

I, Sylvester Williams, hereby direct that in the event of my death or incapacity all  
(Name of Candidate)  
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1. <u>The Assembly @ Durham Christian Center</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: \_\_\_\_\_

Date: \_\_\_\_\_

Sylvester Williams  
7-9-09

Note: This Designation is to be filed with the Election Board where the committee's campaign reports are filed.